

HATHAWAY-SYCAMORES CHILD AND FAMILY SERVICES

EHR/EDI
IMPLEMENTATION
LESSONS LEARNED





Agency Overview (Services Provided)

Clinic Based Care

- ❖ Outpatient/Psychiatric Services

Educational Services

- ❖ School Based Services, Non Public School

Home Based Services

- ❖ In-Home, Connections, Transitional Living Services
- ❖ Therapeutic Behavioral Services, Full Service Partnership

Out-of-Home Care

- ❖ Residential, Foster Care & Adoption,
- ❖ Partnerships and Community Engagement (PACE)

Prevention Services

- ❖ Family Resource Centers
- ❖ Center for Grief and Loss for Children



Clients/Locations/Staff

- Services provided to 1400+ active LAC DMH clients
- 9 service locations
- Over 300 Billers
 - Clinicians, Case Managers, Specialists, Psychiatrists, Nurses, etc.



Time and Money

- COST
 - 1 to 2 million dollars (if building entire infrastructure at today's costs)
 - Network Infrastructure (equipment/outsourcing)
 - Purchase of EHR system

- TIME
 - EHR Contract signed in Dec 2003 (Purchased Billing and Clinical Modules)
 - EDI Go-Live Nov 2005 (1 Reporting Unit).
 - Vendor development, merger delayed billing implementation.
 - Completed EDI implementation Dec 2007.
 - Clinical System Implementation completed Feb 2008.



Expectations/Changes

- Expectations
 - Staff would have immediate access to information needed to inform decision making.
 - Elimination of dual data entry, reduction of DE errors.
 - EDI would be faster than DDE.
 - Reduction of data entry staff.
- Changes
 - Data entry/clerical staff responsibilities changed. Re-trained to handle more complex tasks. Responsible for managing client data in multiple systems.
 - Hired additional staff to handle support calls/development and report writing duties for EHR.



Lessons Learned

- Hands on training for end users.
- EDI testing– Test as many scenarios as possible for your claiming process. Make sure the system is properly configured to handle any situation you might encounter before system signoff with vendor.
- Get intimately acquainted with DMH and HIPAA companion guides.
- Create multidisciplinary implementation team to drive implementation process within your agency. (Clinicians, IT staff, QA, Charts, Accounting.)
- There are a lot of systems available to purchase, so know your business process well before you meet with the vendor.
- Get a thorough understanding from the vendor of what they mean by “customization”.
- Due diligence ...check vendor references. Use CPTT provider list to network with other agencies regarding systems they have in place. Site visits if possible.

Reference Info

- Information available on the web
 - <http://www.capterra.com/mental-health-software>
 - Directory of software companies
 - <http://www.satva.org/members.htm>
 - Software vendor association-Information about member organizations and their software products.
 - Google “Software evaluation” for tools to assist in your vendor evaluation.